



TRANSFER APPLICATION FOR IMPOUNDING STRUCTURES

Reference: Impounding Structure Regulations, 4VAC50-20-00 et seq., Virginia Soil and Water Conservation Board

1. Project Information:

- a. Name of Impounding Structure _____
- b. Inventory Number _____ Other name (if any) _____
- c. Name of Reservoir _____
- d. Classification: Class I Class II Class III (Circle One)

2. Location of Impounding Structure:

- a. City/County _____ Magisterial District _____
- b. Located _____ feet/miles upstream/downstream of Highway Number _____
- c. Name of River or Stream _____
- d. If known, Latitude _____ Longitude _____

3. Transfer Information:

- a. Type of transfer; Construction Permit _____, Alteration Permit _____, Operation and Maintenance Certificate _____ (Check which)
- b. Permit/Certificate Number _____
- c. Effective Date of Permit/Certificate _____
- d. Expiration Date of Permit/Certificate _____

4. Seller Information:

- a. Seller's Name _____
- b. Mailing Address _____

- c. Telephone (____) _____

5. Buyer Information:

- a. Buyer's Name _____
- b. Mailing Address _____

- c. Telephone (____) _____

TRANSFER STATEMENT

I, _____, request to transfer the above referenced
(Seller)
permit/certificate _____ which was effective _____
(Number) (Date)
and expires _____ to _____.
(Date) (Buyer)

I, _____, have reviewed and I am aware of all terms
(Buyer)
and conditions of the permit/certificate _____ and will comply with
(Number)
all said terms and conditions.

Signed _____ on this _____ day _____, 20____.
(Seller)

Signed _____ on this _____ day _____, 20____.
(Buyer)

OWNER'S STATEMENT

I, _____, request that the required forms on file for the above
(Buyer)
referenced permit/certificate be revised to indicate the new ownership. I specifically request
that the Emergency Action Plan Form be amended as follows: Emergency Action Plan; Items #3, 4, & 5.

3. Name of Owner: _____
- Address: _____
- Telephone: (Business) (____) _____
(Residential) (____) _____

4. Name of Dam Operator _____
Address: _____
Telephone: (Business) (____) _____
(Residential) (____) _____
5. Name of Rainfall or Staff Gage Observer for Dam: _____
Address: _____
Telephone: (Business) (____) _____
(Residential) (____) _____
Name of Alternate Observer _____

I certify that the (_____) City/County, the local Emergency Services Coordinator and the State Department of Emergency Management have been advised of this change in ownership.

I further certify that the emergency action and the operation and maintenance plans and schedules on file will be adhered to during the life of the permit except in cases of unanticipated emergency requiring departure therefrom in order to mitigate hazard to life and property, at which time my engineer and the Department of Conservation and Recreation shall be notified.

Signed _____ this _____ day of _____, 20____.
(Owner)

Please fill out and mail to:
Department of Conservation and Recreation
Division of Dam Safety
203 Governor Street
Richmond, Virginia 23219-2094